DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 04/26/2006

Provider Inspection Summary

For the period 04/01/2003 to 03/31/2006 Community Based Residential Facility CLASS AA (AMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Corrected

Facility Information

Facility Name: REM WREN (0008927)

Address: 2008 WREN DR, BELOIT, WI 53511

License Status: REGULAR

Licensed/Certified/Registered 08/01/2000

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0095469 End Date: 09/02/2005 Type: ABBREVIATED Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008259 Served 09/08/2005

Deficiencies Cited Subject Area Subject Area Verified

Deficiencies Cited Subject Area
83.43(3)(b)1 TESTING BY SERVICE COMPANY

Survey ID: 0090740 End Date: 07/30/2003 Type: STANDARD Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10007833 Served 08/08/2003

<u>Deficiencies Cited</u> Subject Area Subject Area Subject Area Subject Area OUT OF STATE BACKGROUND CHECKS O9/02/2005 Yes

83.15(1)(c)1 ADEQUATE STAFFING 09/02/2005 Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.